

# Exhibit G

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## Harrison County Adult Detention Center

George Payne, Sheriff

## Use of Force Report

1) Date: <u>11.16.2005</u>	2) Time: <u>2100 hrs</u>	3) Location: <u>Booking</u>	4) Incident Number
5) Inmate's Name: <u>MCBAY GARY</u>		6) Date of Birth:	7) Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
8) Docket Number: <u>278873</u>	9) Block: <u>N/A</u>	10) Section: <u>N/A</u>	11) Cell: <u>N/A</u>
12) Reason for use of Force: <input checked="" type="checkbox"/> Necessary to defend another officer <input type="checkbox"/> Necessary to defend another inmate <input checked="" type="checkbox"/> To prevent violent behavior <input type="checkbox"/> To restrain for inmate's safety <input type="checkbox"/> Other: _____			
13) Was inmate injured? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	14) Transported? <input type="checkbox"/> yes <input checked="" type="checkbox"/> No	15) Destination: <u>N/A</u>	16) Screened by medical? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17) # of inmates that resisted: <u>2</u>	18) # of officers present: <u>2</u>	19) Supervisor notified / time: <u>SGT MATHIS 2115 HRS</u>	20) Notified supervisor's signature: <u>Sgt. Mathis 157</u>
21) At the time of the incident, the inmate was: <input checked="" type="checkbox"/> Hostile Behavior <input checked="" type="checkbox"/> Suspected under the influence of alcohol / drugs <input type="checkbox"/> Mentally impaired <input type="checkbox"/> Other: _____			
22) Describe the inmate's injuries: <u>FACIAL SWELLING, NOSE BLEED</u>			
23) Levels of resistance: <input checked="" type="checkbox"/> Psychological Intimidation: Explain: _____ <small>(non-verbal cues indicating inmate's attitude or physical readiness)</small> <input type="checkbox"/> Verbal-Non Compliance: Explain: <u>INMATE VERBALLY REFUSED TO "PRESS OUT" / MADE VERBAL THREATS AGAINST COUNTRY STAFF</u> <small>(verbal responses or threats of non-compliance to officer's directions)</small> <input checked="" type="checkbox"/> Passive Resistance: Explain: <u>WOULD NOT COMPLY WITH 1 OR 2 CLEAR VERBAL COMMANDS</u> <small>(dead weight or clinging to objects in an attempt to prevent the officer from gaining control)</small> <input type="checkbox"/> Defensive Resistance: Explain: _____ <small>(pushing, pulling, or running away from the officer to avoid control; never attempting to harm the officer)</small> <input checked="" type="checkbox"/> Active Aggression: Explain: <u>GRIEVED DEPUTY THOMPSON'S SHIFT AND PUNCHED HIM IN THE HEAD</u> <small>(physical actions of assault)</small> <input type="checkbox"/> Aggravated Active Aggression: Explain: _____ <small>(assaults with a weapon)</small>			
24) Levels of Control: (Officer Presence is Implied) <input checked="" type="checkbox"/> Verbal Direction: Explain: <u>MCBAY WAS TOLD TO COMPLETE ACTIONS DURING PRESS OUT.</u> <small>(commands of direction)</small> <input checked="" type="checkbox"/> Empty Hand Control ( <input type="checkbox"/> Soft <input checked="" type="checkbox"/> Hard): Explain <u>CLOSED HAND STRIKES TO HEAD AND FACE</u> <input type="checkbox"/> physical touch <input type="checkbox"/> joint locks <input type="checkbox"/> pressure points <input checked="" type="checkbox"/> hand strikes <input type="checkbox"/> leg strikes			
Body Part: <u>HEAD &amp; FACE</u>		Body Part: _____	
<input type="checkbox"/> Intermediate Weapons: (Chemical etc.): _____			
<input type="checkbox"/> Impact Weapons: (primary or alternative): _____			
<input type="checkbox"/> Lethal Force: specify: (Firearms or other lethal force employed): _____			
25) Reporting Officer No. 274 Name: <u>THOMPSON</u>	Division <u>BOOKING</u>	Reviewing supervisor No. 157 Name: <u>MATHIS</u>	Disposition Date: _____ Page: <u>1 of 1</u>

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**Harrison County Adult Detention Center**

George Payne, Sheriff

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Pressure Point Control Target Areas	Chemical Spray Target Area														
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P.P. --- Pressure point

HEH--- Hard empty hand

I.W. ---Impact Weapon

Variables affecting levels of control

1. Officer / subject size and gender
2. Environmental conditions and totality of circumstances
3. Reaction time

**This section to be completed by Medical staff only!**

27) Injuries Sustained by officer:

 Yes    NoExplain: Officer was grabbed by inmate and hit several times in the head.

28) Injuries Sustained by Inmate:

 Yes    No Explain: Small superficial abrasion to back of head swollen bruised (O) eye.29) Location of Examination: Booking

30) Examined by:

Time of Examination: 2:00Staff Name: Davidson J.D. Badge #: \_\_\_\_\_

31) Medical treatment administered:

 Yes    NoExplain: BP 130/88 P 81L R 16. I/m AAOX3 PERRLA

33) Narrative: I/m placed in shower to dress out I/m grabbed officer and hit him several times in the head. I/m has small superficial cut to back of head. Swollen and bruised. (O) eye, PERRLA, AAOX3. (O) other injuries noted at present time. — J.D. Davidson J.D. I/m stated when asked if his jaw was hurting I/m stated "No my jaw does not hurt." — J.D. Davidson J.D. — J.D. Davidson J.D.

34) Inmate Classification:

 Juvenile    Minimum security    Medium    Maximum security    Inmate worker

35) Reviewing Shift Lieutenant:

No. Name: \_\_\_\_\_

Division: \_\_\_\_\_

36) Disposition:

 Closed    Open    Under review

<input type="checkbox"/> Juvenile Involved <input checked="" type="checkbox"/> Case 1:07-cv-01205-LG-RHW Document 300-11 Filed 11/13/2000 Page 8 of 11 <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Offense Supplement <input type="checkbox"/> Custody Supplement <input type="checkbox"/> Other	NARRATIVE FORM Type Incident: INFORMATIONAL		Date of This Rep't: 11/06/2005	Date of Original Report: 11/06/2005			
	Suspect/Victim Name MCBAY,GARY # 278873		List Complaint Numbers of Connected Cases				
Status	Qty.	Article	Brand/Make	Model Name	Description	Serial No. or OAN	Value

ON NOVEMBER 6TH 2005, DEPUTY M. THOMPSON #224 WAS POSTED IN THE BOOKING DEPARTMENT FOR THE 1900 - 0700 HOURS SHIFT. AT APPROXIMATELY 2115 HOURS DEPUTY THOMPSON WAS PERFORMING THE DRESS OUT PROCEDURE WITH NEW INMATE MCBAY, GARY H.C.A.D.C DOCKET #278873. INMATE MCBAY APPEARED INTOXICATED BUT STILL ABLE TO FOLLOW VERBAL COMMANDS GIVEN BY DEPUTY THOMPSON. WHEN DEPUTY THOMPSON ASKED MCBAY TO REMOVE HIS (MCBAY) CLOTHING, MCBAY INDICATED THAT HE WOULD NOT "GET NAKED " AND TOOK AN AGGRESSIVE POSTURE TOWARDS DEPUTY THOMPSON WITH RAISED CLOSED FISTS. DEPUTY THOMPSON MOVED TOWARD MCBAY TO EMPLOY A SOFT EMPTY HAND CONTROL HOLD AND MCBAY THEN GRABBED DEPUTY THOMPSON BY THE SHIRT AND STRUCK DEPUTY THOMPSON APPROXIMATELY 2 TIMES ON THE SIDE OF THE HEAD WITH A CLOSED FIST. DURING THE ATTACK DEPUTY THOMPSON FELT HE WAS IN PHYSICAL DANGER AND RETURNED MULTIPLE BLOWS WITH CLOSED FISTS TO THE HEAD AND FACE AREA OF MCBAY. DEPUTY THOMPSON STOPPED ALL ACTIONS WHEN MCBAY LET GO OF HIS (THOMPSONS) SHIRT . DEPUTY THOMPSON REQUESTED MEDICAL EVALUATION VIA RADIO DUE TO MCBAY BLEEDING FROM THE NOSE AND FACIAL SWELLING. MEDICAL NURSE EVALUATED MCBAY AT APPROXIMATELY 2125 HOURS AND FOUND NO SERIOUS INJURIES TO HIS PERSON. MCBAY THEN COMPLIED WITH ALL FURTHER INSTRUCTIONS GIVEN BY DEPUTY THOMPSON AND COMPLETED THE DRESS OUT PROCESS WITH NO FURTHER INCIDENT. DEPUTY THOMPSON TOOK NO FUTHER ACTION IN THIS MATTER.

END OF NARRATIVE

<b>DISPOSITION</b>
<input type="checkbox"/> A. Cleared Adult Arrest
<input type="checkbox"/> B. Cleared Exceptional Adult
<input type="checkbox"/> C. Cleared Juvenile Custody
<input type="checkbox"/> D. Cleared Exceptional Juvenile
<input type="checkbox"/> E. Unfounded
<input type="checkbox"/> F. Other - Cleared Exceptional
<input type="checkbox"/> G. Suspended/Closed

Reporting Officer: No. 224 Name M.THOMPSON	Division BOOKING	Reviewing Supervisor: No. Name	Disposition Date
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## *NURSES NOTES*

## NURSE NOTES

